I also wish to receive the following services (for an ■ Complete items 3, 4a, and 4b.
■ Print your name and address on the reverse of this form so that we can return this card to you. extra fee): Attach this form to the front of the mailpiece, or on the back if space does not Addressee's Address permit.

Write "Return Receipt Requested" on the mailpiece below the article number.

The Return Receipt will show to whom the article was delivered and the date delivered. 2. Restricted Delivery Consult postmaster for fee. 14a Article Number 3. Article Addressed to: **BETURN ADDRESS** completed 7001 0360 0003 6676 5190 4b. Service Type Ronald W. Hudson Certified ☐ Registered 45 West Sienna Place ☐ Express Mail ☐ Insured The Woodlands, TX 77382 ☐ Return Receipt for Merchandise ☐ COD 7. Date of Delivery 8. Addressee's Address (Only if requested and fee is paid) **Domestic Return Receipt** First-Class Mail UNITED STATES POSTAL SERVICE Postage & Fees Paid USPS Permit No. G-10 Print your name, address, and ZIP Code in this box U.S. EPA Attn: Barbara Nann (6RC-S) 1445 Ross Avenue

Dallas, Texas 75202

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